# 2372 4 Double

PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective January 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			30				RAT	ΕΤ	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OB	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			3 の minus 20=		. 10		X\$ 9	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 =		2		X42=			OR	X84=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT							OH			
* If the difference in column 1 is less than zero, enter "0" in column 2							+140	_		OR	+280=		
								\L		OR	TOTAL		
3/8/05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								1 6	NTITY	OR	OTHER		
4		CLAIMS		HIGH	EST	(Column 3)	SHIX!		ADDI-	OR I I	SMALL	ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT	RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	. 30	Minus	#30	2	= /	X\$ 9	-		OR	X\$18=		
	Independent	* 3	Minus *** C			X42		. /		OR	X84=		
<b>L</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140:	7		OR	+280=	·	
								AL EE			TOTAL		
	(Column 1) (Column 2) (Column 3)									<b>O</b> ,	ADDIT. FEE		
8		CLAIMS REMAINING		HIGH	ST			Т	ADDI-	1		ADDI-	
AMENDMENT B		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=	X42=			OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							$\top$		1			
		•					+140=			OR	+280=		
TOTAL ADDIT. FEE										OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus .	**		=	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***	-0.2 1.0	=	X42=	十		ŀ			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						A42=	+		OR	X84=		
+140=										OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DDIT. FEE		
- 616	r the "Highest Nu The "Highest Num	mber Previously Paid Ober Previously Paid	For" (Total o	S SPACE is Independer	less tha nt) is the	n 3, enter "3." highest number			priate box				
											•		

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